

Crisis Intervention for Yourself and Others

Debra Littrell, MA KC CISM Team - Team Leader
Ronald W. Quinsey, PM CISM Program Coordinator
KC CISM Team – Peer Debrief

GOALS:

To gain knowledge in recognizing common emotional and psychological stress reactions of citizens and emergency service workers. This Mastery Level chapter will focus on techniques from developing a balanced lifestyle to Critical Incident Stress Management.

OBJECTIVES:

1. Understand what a crisis is and what we can do
2. Understand why the Emergency Service Profession is at greater risk of stress and what makes an event more likely to be a critical incident.
3. Understand the difference between critical incident stress, delayed stress and cumulative stress and be able to recognize signs and symptoms of stress.
4. Understand methods, techniques and services to manage the different forms of stress and what resources you have available to you in King County.

Crisis Intervention for Others and Self

Crisis is defined as “when a person faces an obstacle to important goals that is, for a time, insurmountable through the utilization of customary methods of problem solving. A period of disorganization ensues, a period of upset, during which many abortive attempts at solution are made.” (Caplan, 1961) There is a rise of inner tension, there are signs of anxiety and there is disorganization of function, resulting in a protracted period of emotional upset.

Resolution of crisis is often based upon how balanced the individual was before the event and how quickly they can see their way through the event. Because of the disorganization that occurs in crises people return to a state of normalcy quicker when they are helped through their crisis.

Helping People in Crisis

Optimal care for someone involved in an emergency medical situation would include some sort of crisis intervention. Emergency service professionals often ask the victim or victim's family if there is someone (not involved) they can call to help comfort them through their crisis. If you are in a position to help others in crisis there are some skills you should develop.

1. Listen - Learn how to listen. Listen to what is being said. Don't give advice. You can direct people to services, but most important is you are just listen and acknowledge what the person in crisis is saying or feeling. Sometimes, by vocalizing what is going on allows them to become focused and see a solution.

2. Don't try to fix it - Since emergency service personnel are action oriented they often feel they need to "do something" to fix it. In these cases just being a supportive presence is all you need to do. "People never care how much you know until they know how much you care".

3. Know some resources - Be familiar with what services are available in your area or who knows what support services are available and how to access them. Helping link a person in crisis into resource or support services is the best thing you can do.

4. Know critical incident stress signs and symptoms - Learn what the critical incident stress reactions are so you can help the person identify what is happening to them so to link them into CISM services. (see below)

5. Duty to warn - If the person is talking about doing harm to themselves or others you are required by law to notify someone. A supervisor, medical control, mental health professional or law enforcement official can assist you with at-risk individuals. When faced with someone threatening harm it is best to handle the situation calmly, without false promises or physical restraining. Do not leave an individual alone until the situation is resolved.

<http://www.trauma-pages.com/pg4.htm>

The Emergency Service Professional: Self-Help and Stress Management - Personality of the Emergency Service Worker

The Emergency Service Worker has a different set of personality traits from the average citizen, traits that both make them good at their jobs and that can lead to more stress reactions.

They tend:

- ☐ to be obsessive/compulsive, wanting things to be just right.
- ☐ have a high need for control and for stimulation.
- ☐ often have difficulty saying no and are action oriented.
- ☐ become easily bored and are risk takers.
- ☐ have a strong need to be needed and have a rescue personality.
- ☐ are driven by internal motivations and are family oriented.
- ☐ generally have a high tolerance for stress and ambiguity.

These traits and skills make them good at what they do. These traits can also drive them to forget about self-care and prevent them from using good stress reduction techniques. Emergency Service Personnel are exposed to a wide variety of crisis events throughout their careers and far more than average citizens. Emergency Service workers adapt and become desensitized to the events they deal with as a profession (see Critical Incidents below).

Different Types of Stress

1. Critical Incident Stress occurs when an individual experiences an unusual or extreme emotional reaction after an event.
2. Delayed Stress reactions to a critical incident or combination of several incidents may occur weeks, months or even years after the events have taken place.

3. Cumulative Stress is the exhaustion of a person's normal coping strategies after being exposed to physical and emotional stressors over a period of time. Some commonly refer to this type as "burn-out."

<http://www.mckinley.uiuc.edu/health-info/stress/stress.html>

Normal Reactions to Abnormal Events

Although stress reactions can look similar to reactions seen in people with behavioral emergencies they are different. People with behavioral emergencies or chronic mental health issues have these signs and symptoms chronically.

PHYSICAL

appetite changes
headaches*
tension
fatigue
weight change
increasing colds*
muscle aches*
rash*
foot/finger tapping
increased alcohol use
increased drug use
increased tobacco use

RELATIONAL

feeling isolated
intolerant of others
resentful
loneliness
lashing out at others
marriage problems
social withdrawal
lowered sex drive
nagging
anti-social behavior
lack of intimacy

INTELLECTUAL

forgetfulness
dull senses
poor concentration
stuttering
low productivity
negative attitude
confusion
lethargy
loss of creativity
boredom
continuous daydreams
negative self-talk

SPIRITUAL

feeling of emptiness
doubt in religious or spiritual beliefs
feeling unforgiven
spiritually lonely
looking for magical solutions
loss of purpose of life
needing to prove self worth
cynicism about life

EMOTIONAL

anxiety
frustration
short temper
apathy
mood swings
nightmares
crying spells
irritability
depression
easily discouraged
easily startled
stoical

Signs and Symptoms of Stress

Cycles of Stress

During crisis there are various phases. When our senses are overwhelmed by sights, sounds, smells, etc., or we perceive ourselves or others in danger our brain releases a number of chemicals in the limbic system to mobilize us to fight or flight (a sympathetic response). The good news is we can take action and respond to the situation. The bad news is our ability to concentrate, remember things decreases and we have a number of other stress reactions which stay with us even after the event is over. After the crisis phase we drop into a post crisis depression which can last for hours, days or even months. Emergency service workers who experience critical incident upon critical incident, without a period of respite, suffer chronic stress and worsen the effects of critical incident stress should a critical incident occur.

What is a Critical Incident

Jeffrey Mitchell, Ph.D. (firefighter/paramedic and developer of the ICISF Model, formally the Mitchell Model) defines a Critical Incident as: "Any incident faced by emergency services personnel that causes them to experience unusually strong emotional reactions which have the potential to interfere with their ability to function either at the scene or later. All that is necessary is that the incident, regardless of type, generates unusually strong feelings in the emergency workers."

<http://www.fiu.edu/~victimad/psyart.html>

What is important to remember here is that everyone responds differently to different events. Some will respond more to a death of a child (especially if they have their own children) while others will respond more to specific sights or smells they experienced at the scene. It is critical that you **do not** compare your responses to others. Your response is your response!

Events that Often Become Critical Incidents:

- _ Human-caused events elicit stronger feelings and reactions more than natural
- _ Disasters or freak occurrences
- _ Events with unusual sights, sounds, or smells
- _ Large number of victims
- _ Night events increase perceptual distortions
- _ Events which are life-threatening to the worker
- _ Workers who have been in physical jeopardy
- _ Equipment used in the emergency fails
- _ Breakdown in incident operations
- _ Toxic exposures or health risks
- _ Events which violate the worker's sense of how the world is or should be
- _ Death of children, teens, young parents

Events drawing high media coverage

- _ Interference in performing job functions
- _ Working under the pressure of being observed

Events that have elements that the worker identifies with

- _ Death of a co-worker or another rescue worker, especially **line-of-duty death**
- _ Knowing any victims in an incident
- _ Elements parallel issues in worker's own life

Balanced Lifestyle: Pursuit for Health

By keeping as much balance and stability in your daily life and various aspects of your life, you develop a stable foundation to work from. This stable foundation is key to being able to bounce back from job related stress (both physical and critical incident stress). Long term unchecked stress can shorten careers. Recognizing when we are in and out of balance is key to developing long-term stability.

There are eight basic activities we can use to help keep a sense of balance in our lives.

They are:

- 1. Diet** - a healthy diet that keeps your body healthy and your mind clear.
- 2. Exercise** - promotes a sense of well being and decreases daily and incident specific stress effects.
- 3. Job/Finances** - living within your means and not over or under working.
- 4. Friends** - having time for play and socialize with others.
- 5. Family** - having time with family to enjoy them and receive love from them.
- 6. Values/Spirituality** - time to review your behaviors and whether it fits in with your values and ethics, and/or attention to your spiritual practice.
- 7. Sleep** - consistent sleep on a daily basis (sleep is often sacrificed in emergency services because of the variable shifts and circadian rhythm changes).
- 8. Hobbies/Fun** - having activities where you can relax, create; activities that are fulfilling and satisfying.

Living Through Critical Stress

One effect of critical stress is that we question whether we are normal or not. One benefit of a Critical Incident Stress Debriefing (CISD) is for us to hear from fellow emergency service workers that they too share in some of the same reactions. These reactions are normal, and in cases of grief and loss, these reactions can last longer. Grief has a variety of phases that come and go, from shock or disbelief,

denial, anger, sadness, mourning to resolution or acceptance. Unresolved critical incident stress can become Post Traumatic Stress Disorder (PTSD) a chronic and debilitating condition.

Stress Management Methods, Techniques and Services

Daily use of relaxation exercises trains your body to release stress in a natural and regular way. If you use these activities routinely your body will be able to release the stress more quickly after a critical incident because it is familiar with this tool, causing it to respond more quickly. If you use a relaxation technique (i.e. meditation) only after a critical incident you will get benefit but your physical body won't have the memory of this kind of relaxation. These

are a wide variety of relaxation techniques. Some are as short as 15 minutes and some are as long as an hour. Some focus on relaxing each muscle in the body. Some use visual images. Some use breathing techniques. Try them out and choose the ones you like best.

Breathing exercises create a relaxed state in the body. There are many types of breathing exercises meditation, Yoga, Tai Chi, or Qi Gong all include breathing activities. These tools are designed to relax the body and quiet the mind.

All of these activities give your brain and body a foundation of relaxation. Then if a critical incident occurs you will have more resilience and can prevent long term effects. Keeping your life well balanced and doing good daily self-care helps develop this foundation. Attending to a healthy lifestyle and keeping your diet, exercise, family, friends, fun/hobbies, job/ finances, spirituality/values, sleep in balance will give you a solid foundation to work from.

Critical Incident Stress Management (CISM) Services

There is an array of services available to you for managing stress reactions.

- **Pre Incident Education** The King County CISM Team has an educational program that provides an overview of critical incident stress reactions, how to help yourself and others and what CISM services are available. Pre-incident information of what to look for, how to do good self-care after an event, and how to access CISM support often decreases the need for formal debriefings (CISD).

- **Peer Support** The King County CISM Program can help your agency develop a Peer Support team. Peer team members provide personal and confidential support to co-workers who may be in crisis or suffering stress. Peers can spend one-on-one time as needed to just listen, answer questions, provide referrals, advise command when CISM support might be needed and facilitate mobilization CISM services.

- **Family Support** Family needs are often overlooked. The emergency service worker's family is their primary support system. A formal Family Support program can be established within your agency so family can receive education as to how to help their loved one and given support during times when their emergency service worker suffering critical incident reactions.

- **1:1 (One-on-one)** If an emergency service worker has been solely exposed to a Critical Incident and needs individual help, a Peer Team or King County CISM Team member can provide a 1:1 debriefing.

- **Defusing** A Defusing is a short post-incident intervention conducted within 8 hours after the incident, often back at the station and not on-scene. Usually, only those persons most directly affected are involved. Defusings must be conducted by trained CISM team members.

- **Demobilization** A Demobilization is a short (10-15 minute) meeting by CISM team members held in conjunction with a large scale incident, often in the Rehabilitation

Sector. Emergency personnel are sent to a large meeting facility to rest, have something to eat and meet with CISM team members, prior to returning to duty or to home. Personnel are not requested to discuss the incident. CISM team members will:

1. Briefly provide information on typical effects of critical incident stress responses
2. Provide practical suggestions for stress management in the hours and days following the incident.
3. Answer general questions about what they just went through
4. A demobilization replaces a defusing. You do not do both, though both the Defusing and Demobilization gives individuals some immediate support so they can return to service or home.

□ **Critical Incident Stress Debriefing (CISD) Process**

Critical Incident Stress Debriefing offers people who have been involved in a critical incident the chance to come together as a group and to have some time to identify their own personal reactions to the event. A debriefing is:

- A group process
- A discussion
- An opportunity to describe their reactions
- An opportunity to hear others reactions
- An educational process

Being involved in a critical incident can make a person feel isolated. Traumatic events often trigger responses in people that are unfamiliar and sometimes frightening. Debriefings offer information about **normal** human responses to **abnormal** events and help workers understand what they are experiencing. Debriefings accelerate the **normal** recovery of **normal** people.

Debriefings also help people develop strategies for coping with their reactions to the event. There is much evidence that having strong social supports after a traumatic event helps people reestablish a sense of psychological well-being and regain equilibrium. Many emergency service workers say that it is difficult to share these events with friends and family who weren't there or couldn't understand. They don't want to expose them (especially their family) to the details of these situations. Providing a CISD for workers involved in critical incidents offers an important way to ensure the social support which is so necessary to recover from these events.

A **CISM team** is made up of mental health professionals and peer debriefers trained in crisis intervention and traumatic stress reactions. Trained peer debriefers work in the field of emergency services.

□ **Family Debriefing** Some critical incidents can effect the family members of emergency service personnel, ie: Line of Duty Death or severe injury of an emergency service worker. A family debriefing can be requested. This request can be made by Peer Support Team members or by Command. The same debriefing model is used for a Family Debriefing as for Emergency Service Personnel. Family should never attend an incident CISD, they usually have their own CISD.

□ **Referrals** If people find they are continuing to have symptoms that are distressing to them after a Critical Incident, they may ask the Mental Health Professional on their debriefing team to provide them with treatment resources in their local community. Referrals may be made to Private Therapist or Employee Assistance Programs.

Accessing CISM Services The King County Emergency Medical Services Division coordinates the CISM Program for emergency service workers in Seattle/King County area.

The CISM Program provides all of the above services free of charge for emergency services agencies in King County.

Who is Responsible for Requesting CISM Services? Emergency Service Personnel, Command Officers and Medical Control Authorities are responsible for identifying and recognizing significant incidents that may require CISM services. Debriefings have been found to be most effective if they occur after 24 hours and within 72 hours of a critical incident, it is important to request a debriefing as soon as possible after the event.

How Do I Request CISM Services? The King County CISM Team is activated by calling 253-372-1400 (Valley Communications Center). The dispatcher will contact the CISM Team Coordinator who will immediately contact the requesting agency, evaluate the needs of the agency and determine which services are needed.